

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

IN RE:

ROBERT ADAMS,

Debtor .

**Chapter 13
Case No. 13-52817
Judge: MARK A. RANDON**

DEBTOR'S CERTIFICATION OF INFORMATION REGARDING DISCHARGE

The Chapter 13 debtor, being first duly sworn, provides the following:

1. Has the Debtor completed an instructional course concerning personal financial management as provided in 11 U.S.C. Section 111 or is the Debtor exempt from completing such a course pursuant to 11 U.S.C. Section 1328(g)(2) (*check one*):

NO _____ YES X _____ EXEMPT _____

2. Has any debt been determined to be non-dischargeable or is any action currently pending to determine a debt to be non-dischargeable pursuant to:? (*check one*):

Section	YES	NO
11 U.S.C. Section 523(a)(2)		X
11 U.S.C. Section 523(a)(4)		X
11 U.S.C. Section 523(C)		X

If you answered "yes" to any of the above, please identify the creditor and the legal basis for the action

Name of Creditor: _____

11 USC § 523(a)(2)

Address of Creditor: _____

11 USC § 523(a)(4)

City, State and ZIP: _____

11 USC § 523(C)

City, State and ZIP: _____

If more space is needed, please attach a separate sheet.

3. Has any debt been reaffirmed pursuant to 11 U.S.C. Section 524(c)? (*check one*):

NO X _____ YES _____ *If YES, please state*

Name of Creditor: _____

Address of Creditor: _____

City, State and ZIP: _____

If more space is needed, please attach a separate sheet.

4. Debtor's Current Address: 3986 Fieldview Road, Lake Orion, MI 48360

Name of Debtor's
Current Employer: P&C Group 1, Inc.

Debtor's Current
Employer's Address: 37000 west Twelve Mile, Suite 105
Farmington Hills, MI 48331

DISCLOSURE OF DOMESTIC SUPPORT OBLIGATIONS (as defined in 11 U.S.C. Section 101(14A))

Is the Debtor currently paying or is required to pay alimony, maintenance or support to or on behalf of a spouse, former spouse or child (*check one*):

YES X NO _____

If YES:

1. list the Name and Address of each Spouse, Former Spouse or Child to or for whom alimony, maintenance or support is paid or required to be paid (if more space is needed, please attach a separate sheet):

Name Elizabeth A. Adams

Address 147 Old Perch Road

City Rochester Hills State Michigan ZIP code 48309

Phone No. 248-495-9349 Account Number 11-791586-DM

2. **DEBTOR HEREBY CERTIFIES THAT DEBTOR (*check one*) (X HAS) (HAS NOT) PAID ALL AMOUNTS ON OR IN CONNECTION WITH A DOMESTIC SUPPORT OBLIGATION THAT CAME DUE ON OR BEFORE THE DATE OF THIS CERTIFICATION INCLUDING AMOUNTS DUE BEFORE THE PETITION WAS FILED**

CERTIFICATION

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.



Robert M. Adams
Debtor's Signature

December 1, 2016
Date